



STATE OF MICHIGAN

DEPARTMENT OF COMMUNITY HEALTH
LANSING

JENNIFER M. GRANHOLM
GOVERNOR

JANET OLSZEWSKI
DIRECTOR

March 1, 2007

TO: Executive Directors of Prepaid Inpatient Health Plans (PIHPs)
and Community Mental Health Services Programs (CMHSPs)

FROM: ^{ps}Patrick Barrie, Deputy Director
Mental Health and Substance Abuse Administration

SUBJECT: Michigan Department of Community Health (MDCH) Recovery
Policy and the Role of Peer Support Specialists

It is the policy of MDCH, under the leadership of Director Janet Olszewski and the vision of Governor Jennifer Granholm, to support our system transformation to one based on the fundamental principle of recovery for adults with mental illness. The major emphasis has been creation of the Michigan Recovery Council and the availability of Peer Support Specialists. The Michigan Recovery Council is charged with reviewing all MDCH policies that support or hinder recovery and proposing pro-active changes that will further the goals of this policy directive. On January 19, 2007, I met with the Michigan Recovery Council to emphasize the department's commitment to this major pro-consumer policy and to communicate the department's desire to see each Prepaid Inpatient Health Plan, and Community Mental Health Services Program affiliate to the PIHP (PIHP/CMHSP), implement it as part of its core mission.

MDCH strongly believes that persons who have received our services have a valuable perspective on how to help others. Consequently, we believe that by employing them as Peer Support Specialists, we will strengthen our system of support. This department direction was reflected in the scoring of the Application for Participation for the Medicaid Specialty Services Program. Since 1998, Mental Health Block Grant funds have been awarded to PIHP/CMHSPs to employ primary consumers to work with peers in their recovery journeys. A key finding from the block grant experience was the need to establish a mechanism to continue the positions when grant funding ended. Last year, the Centers for Medicare and Medicaid Services (CMS) approved the inclusion of Peer Support Specialists as a service offered under the authority of 1915 (b)(3).

These changes in the Specialty Services Waiver require that each PIHP/CMHSP provide the availability of a Peer Support Specialist as an option during the person-centered planning process. To minimally comply with the requirements of the waiver, each PIHP/CMHSP in the state must assure that consumers have a choice of peer

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specialists at the PIHP/CMHSP or through its contract agencies. We acknowledge and applaud the PIHP/CMHSPs that have employed a large number of individuals in both part and full-time positions. These early adopters have been quick to recognize and support the importance of this grass roots movement and are working to change organizational practices necessary to make this a mainstream practice. Key areas that require attention are health care coverage, benefits, adequate salary levels, a mix of both full and part-time positions and supporting an organizational culture of recovery with special attention to the removal of "micro assaults" that result in Peer Support Specialists being treated in a disrespectful manner.

Michigan is receiving strong national attention regarding both our vision and the Medicaid funding mechanism developed to support the employment of Peer Support Specialists. I have directed the Bureau of Community Mental Health Services, led by Irene Kazieczko, to carry out this effort. MDCH has made significant efforts to support full and part-time employment opportunities for people with mental illness as Peer Support Specialists. Since 2005, MDCH has covered all of the expenses for training, testing and certifying Peer Support Specialists across the state. The training requirements are both intensive and comprehensive. The feedback we receive from consumers and their families gives us even greater reason to trust the wisdom of furthering our commitment to this core policy. At the recent awards ceremony in December, peers and their guests celebrated the achievement both individually and collectively as the new movement grew with 127 individuals certified in the state. This is our future. To not improve and expand on this transformation would be a major disservice to the people we work to serve each and every day.

Although certification is not currently required, we believe that in the next year or two we will have an adequate number of trained and certified peers in the workforce to meet the demands of beneficiaries statewide. At that point, we will provide notification of the requirement for certification.

As you are aware, MDCH will have four more trainings this year in March, April, May and July. We also have begun supporting continuing education efforts by developing a partnership with the Copeland Center for Wellness and Recovery. At some of the upcoming trainings, a full week of learning will be provided for 18 Certified Peer Support Specialists to become WRAP Facilitators who will receive certification by the Copeland Center. All of these activities will persist as Michigan continues to support recovery as the foundation to service planning. We will continue to provide training and certification activities as a service to the PIHP/CMHSPs, Peer Support Specialists, and beneficiaries across the state. If you have any questions regarding the Peer Support Specialist initiative, please contact Pam Werner. She can be reached at (517) 335-4078 or wernerp@michigan.gov. For consultation and technical assistance on recovery, Colleen Jasper, Director of the Office of Consumer Relations, would be happy to help you. She may be contacted at (517) 373-1255 or jasper@michigan.gov. We expect to add further resources to these efforts to support systems transformation.

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No one person, department, or agency can take sole credit for the success of this program to date. But we can all take a moment to feel good about the part that each of us has played. It has been a collaborative effort where consumers, PIHP/CMHSPs, MDCH and stakeholders sat down and talked, shared concerns, made changes, took risks and eventually came to establish programs that better serve people in need. We can take great pride in establishing a program that has improved service to consumers. We should also feel pride that Michigan was asked to write a chapter in the soon to be released SAMHSA Toolkit for Peer Supports. This chapter highlights the journey of many peers and contains quotes from certified peers working across the state. When the toolkit is published, we will notify all PIHP/CMHSPs across the state.

As we celebrate the success of peers, we are also aware of the barriers that exist at the local level. Many of you must grapple with them on a daily basis. MDCH is committed to working with you in resolving them by providing statewide training and technical assistance. However, many of the barriers that need to be addressed must be done locally in partnership with the Peer Support Specialists. To the extent that the services of MDCH are both needed and desired, we are firmly committed to assisting in these efforts.

I look forward to working with each of you in your leadership efforts to support this system transformation.

cc: Janet Olszewski
Recovery Council Members and Partners
Certified Peer Support Specialists in Michigan
MDCH Mental Health and Substance Abuse Management Team